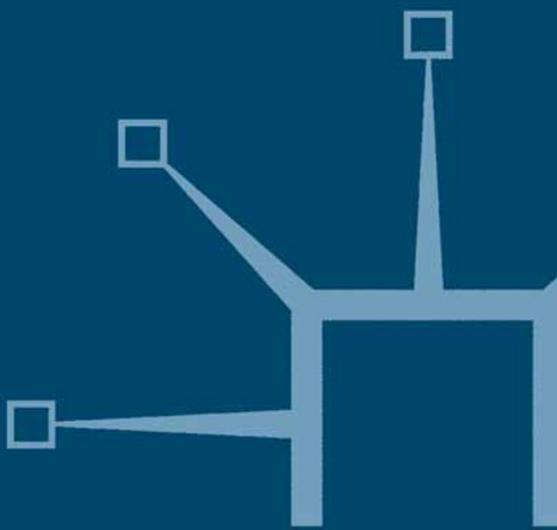


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The Business Leader's Health Manual

Tips and Strategies for Getting to
the Top and Staying There

Juliette McGannon and Michael McGannon



THE BUSINESS LEADER'S HEALTH MANUAL

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Juliette McGannon

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of Proactive Health (MIPH), and Director of the Business
Leader's Health Program (BLHP) at INSEAD*

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*This book is dedicated to our ancestors,
Don and Patty McGannon, models of love
and loyalty, and our sons, Kevin, Jules and Seàn
in gratitude for helping us to become worthy ancestors*

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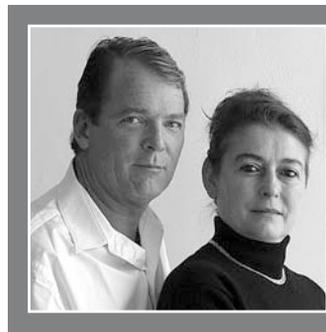
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This is their third book, after *Urban Warrior's Book of Solutions* (1999) and *Fit for the Fast Track* (2002). They are presently developing their Business Leader's Health Program (BLHP) on the Second Life platform.

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Run your own Business Leader's Health Programme and witness the dramatic difference in your organization.

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Foreword

It is essential for today's leaders to be nimble not only in mind, but also in body. In a constantly changing global landscape, executives encounter numerous challenges and opportunities that require such flexibility – from adapting to fluctuations in the economy and assessing risk profiles to expanding into new markets and achieving sustainable growth. The *Business Leader's Health Manual* proves that in order to prosper under these conditions, leaders should place further emphasis on their overall health in addition to their careers. Finding a balance between work and life is necessary to achieve lasting success.

The McGannons' expertise in leadership and health has been instrumental to the participants in our executive education programs. At INSEAD, we take a holistic approach to developing leaders. While business and financial acumen are critical, leaders must also adopt a global, socially responsible mindset and a healthy lifestyle. The McGannons' manual will be an extremely valuable guide for any executive who wants to maximize their effectiveness in work and life. As careers and schedules become increasingly demanding, health management will become part and parcel to every leader's toolkit.

J. Frank Brown
Dean of INSEAD

Introduction

*Life moves so much more rapidly now than it did before ...
the huge acceleration in the rate of growth of facts, of knowledge, of
techniques, of inventions, of advances in technology ...*

*To put it bluntly, we need a different type of human being ... able to live in a
world that changes perpetually, which doesn't stand still, who don't need to
staticize the world ... to freeze it and make it stable, who don't need to do what
their daddies did, who are able to face tomorrow not knowing what's going to
come, not knowing what will happen, with confidence enough in ourselves that
we will be able to improvise in that situation which has never existed before.*

*The society which can turn out such people will survive;
the societies that cannot turn out such people, will die.*

Abraham Maslow, *The Farther Reaches of Human Nature*

The term *leader* has evolved and transmuted over time, often idealizing, even romanticizing, military aspects of leadership to fire up the troops to want to follow their bellicose leader. But leadership is far more than glorifying the hell of war, as we have seen throughout history and very recently again.

*True leadership starts precisely with a minority of ONE.
That is, all leaders lead themselves first and foremost,
knowing full well that in doing so, others want to follow their lead.*

To get a better idea what sort of aspirations are held by today's business leaders, we simply asked the managers as part of their participation in the Leaders' Health Programme the following two questions (the responses are given in order):

1. What are the top 10 leaders of all time?

1. Mahatma Gandhi
2. Jesus Christ
3. The Prophet Mohammed
4. The Buddha
5. Martin Luther King, Jr.
6. John F. Kennedy
7. Nelson Mandela
8. Lee Kuan Yew
9. Sir Winston Churchill (as wartime leader)
10. Ernest Shackleton, Irish explorer

2. What are the top five personal qualities of truly great leaders?

1. Courage (Hans in Chapter 1)
2. Fairness (Isabelle in Chapter 2)
3. Commitment (Fadi in Chapter 3)
4. Confidence (Rachel in Chapter 4)
5. Humility (Miguel in Chapter 5)

The objective of this manual, full of tips and solutions, is to assist business leaders in their climb to the top of life's mountains. Each and every one of these leaders finishes their stories by owning their **CORE** Assets (health and sanity). Their new power is in their focus on the three Pillars of Life, without which leadership is impossible:

- Health (mental and physical)
- Family and friends
- Job

All three of these Pillars must be in optimal shape through evaluation and maintenance.

At the end of the day or life, a leader is one who hears the wake-up calls in life in their myriad forms and has the courage to begin their own Journey of Awakening. Each of these leaders within has overcome his or her personal challenges, crossed the Valley of Darkness and emerged whole and intact because they realize that self-mastery is the only game worth playing.

JULIETTE AND MICHAEL MCGANNON
November 2008
Nice, France

The heart of the matter: from ticker to timebomb ... and back!

1 chapter

In this chapter, you will learn, by illustrative example, how to first get it wrong and then get it right by:

- 1 Understanding heart disease, and thereby avoiding it
- 2 Being free of the abdominal obesity associated with heart disease and Alzheimer's disease
- 3 Understanding the role of insulin and sugar in the metabolic syndrome
- 4 Controlling your cholesterol without drugs
- 5 Discovering BURST walking to achieve total fitness



Abbreviations and acronyms that you will need to read this chapter smoothly include:

AGE	Advanced glycated end-product
ALA	Alpha-linolenic acid
BMI	Body mass index
BP	Blood pressure
CAD	Coronary artery disease
CCU	Coronary Care Unit
EFA	Essential fatty acid
GI	Glycemic index
HAP	Health Action Plan
HDL	High-density lipoprotein
HS-CRP	High-sensitivity C-reactive protein
LA	Linoleic acid
LDL	Low-density lipoprotein
SAD	Standard American diet
TGs	Triglycerides
WHR	Waist-to-hip ratio

INTRODUCTION

My name is Hans. My home base is in The Netherlands, but I have lived in the US and Asia for stints of 4 years apiece: I am truly a world citizen.

My Journey of Awakening started out with an anatomy of a health bank-

ruptcy leading to a serious heart problem. It is a still photograph of the “me” before I woke up from a nightmare. Before my heart problem, I had been very proactive and faithful to a healthy profit margin at work (“the bottom line”), but, with regard to my core assets – my spouse, my family, my health, sanity, and happiness – I had been very reactive and negligent. By most standards, I had been living the “good life,” and things seemed to be going just fine on all fronts, except for that nagging ear ticking that sometimes kept me awake at night.

A few years ago, I started as a real time bomb, but I just couldn't hear the ticking ... not yet. Let me share my journey of awakening with you.

PROFESSIONAL LIFE

My university education was intense yet smooth, aside from the untimely death of my father at the early age of 54 years from “some heart problem.” My mother subsequently became depressed, gained weight, and developed mild diabetes. Curiously, since the death of my father, I myself had developed a bizarre ear problem, a ticking, that affected my balance from time to time. I actually used that as an excuse to stop my jogging program.

I had developed, several years after my MBA, my own version of “hero”: the fellow who would put in a full 16-hour day of negotiations in our Hong Kong office, jump on a plane for 14 hours to London, arrive at 8 a.m., shower, and hit the ground running to put in a 14-hour working day. Wow! High blood pressure and a bit of a big tummy seemed to me to be a small price to pay for such collective adulation. I am now the Vice President in charge of design development for a company specializing in machine parts. In the early days, my management philosophy in business was: If it ain't broke, don't fix it. I applied the same philosophy to my health.

After many brief discussions with my family, and with my wife Elke's tacit consent, I had decided to assume an even heavier workload, with lots of travel to the Far East (about 150 days per year) in order to achieve personal and professional objectives.

PERSONAL LIFE

I am now 46 years of age, about 10 years younger than my father was when he had his heart attack. After 21 years, I was (and still am) happily married to Elke, the mother of our four children: Cornelius aged 18, Emma, 15, Jan, 11, and little Henk (our son with special learning needs), who is 7. We live in a small city in The Netherlands. I play tennis on the weekends, when it is warm enough.

The intimate aspects of my relationship with Elke had, in a word, been better before all this happened. She worked off and on and seemed content with her ladies groups' meetings. But my long hours and business trips had stolen something special away from our relationship. We drifted apart and

had discussed separation, and even the “D” word, on numerous occasions when we argued.

I thought for sure that the children had everything they needed or wanted. Sure, sometimes they would whine and complain: Cornelius about my missing his football games and judo tournaments, and Emma about her piano recitals. But they had everything they really needed to survive.

The worst part of the week was, of course, Saturday mornings. There was always a little tension as if we needed some time to reacquaint ourselves, lots of pregnant, sometimes painful, silences. The whole family would make legitimate claims on my time and energy. Unfortunately, at a time when they needed my energy and attention the most, I was in need of being left alone to read my paper in the garden, answer mails, take some calls. Some day, I thought, they’ll understand.

This is my story of how I was forced to get back to basics of life, backing away from the brink.

HEALTH PROFILE

Slowly, imperceptively, starting in the late 1980s, I put a few inches around my waist (as if my whole metabolism was slowing down), my blood pressure started climbing, and I got out of breath more easily. Elke didn’t seem to care too much about my widening girth (perhaps because she also had been gaining weight herself). In an effort to forestall blood pressure issues and diabetes, we had tried *everything*, including sweaty jogging suits, herbal diets, low-fat diets, and all the fad diets that Elke could find.

Until 1999, I had a life that followed fairly traditional values of hard work, sacrifice, and advancement through the ranks of my company, more or less in the way I had predicted when I graduated from business school. And I did very well. After 2001, the global markets opened up and I found myself traveling incessantly to China, the US, and India, much to my delight.

NUTRITION

One word could best describe what and how I used to eat: rich. Lots of cakes, biscuits, pastries, chips, fatty meats like T-bone steaks, pork chops, bacon, and lamb at will. I’m not that keen on salads or vegetables (I could never tell exactly what fibre was), especially since my bout of “the runs” during my last trip to India the previous year. When I thought about it, I would take a one-a-day multivitamin.

Slowly but surely, various imbalances that I had thought improbable in my own life took hold. I had had a weight gain of roughly 1 kilogram (kg) per year over the past 7 years. My physical form, which I had since stopped checking in the morning mirror, went from svelte to bloated, amorphous. I used to say that I was “big boned,” but now my children would only laugh at that euphemism. At their insistence, I had tried the endless stream of “new diets” without any real success. I generally ate a late dinner, drank about 45

drinks (15 half-pints of beer, 25 glasses of wine, and about 5 glasses of scotch a week – often more), and smoked the occasional cigarette. I thought I was “in touch” with my body, mind, and feelings.

PHYSICAL ACTIVITY

Although a very active athlete (I adore football and tennis) as a university student, physical activity for me had been something of a luxury: restricted to an occasional game of tennis or golf on weekends, but only if and when time permitted. Even our once regular family hikes in the countryside had been phased out.

Once an avid reader of everything from spy novels to political analyses, I had been unable to get in any real reading since my last brief vacation 18 months before, when I had read half a novel. I probably read too many daily newspapers and management books and watched too much TV.

Most important leadership quality

Courage

My idea of great leaders

- John Fitzgerald Kennedy
- Mahatma Gandhi
- Martin Luther King, Jr.

My most inspiring quotation

The stories of past courage can define that ingredient – they can teach, they can offer hope, they can provide inspiration. But they cannot supply courage itself. For this each man must look into his own soul.

John F. Kennedy, Profiles in Courage

MY FIRST WAKE-UP CALL

The first check-up

I never had much cause for concern or reflection. Sure, there was an occasional heart attack or cancer victim at work. Although I cannot pinpoint the exact time, I found myself gradually to be more withdrawn and drinking more alcohol, both alone and after work with colleagues. I had slowly and methodically isolated myself from those things I loved. I was rapidly changing for the worse, and I did not want to hear about it. Although my family said that they understood my frequent absences, I still felt bad about being a “phantom father and spouse” and about my half-hearted attempts to spend more time at home.

Things began to change rather quickly in my life as I turned 44 years of age, head of an international division of a multinational company. Eventually, just for some peace, I succumbed to my wife's and kids' pleading to go for a medical

exam, a check-up. After all, I reasoned, if I do it with my car, why not my body? Maybe they would find out what this annoying ticking in my ears was. Going into this check-up, I was obviously well aware of the fact that I had many of the telltale signs and symptoms of someone who had been neglecting his body. Joking about it had become a ritual. I dutifully presented myself to Dr. Nekkers, an old friend and tennis partner, with the usual list of complaints: I slept poorly and always felt tired; my libido was shot to hell; chronic backaches and headaches plagued me with increasing frequency; as I usually bolted my food, I had dreadful heartburn and bloating; and lastly, mild depression struck me from time to time. (I used to think too much.)

I had been certain that, despite these nuisances, everything would be decreed more or less “normal” and that the same old lecture from Dr. Nekkers was as customary as my complaint list: lose some weight, stop smoking and drinking so much, watch your diet, get some more exercise, and so on. Though an excellent doctor and good friend over the years, Dr. Nekkers was not a particularly good actor. As he performed my physical exam, his bushy eyebrows perked up and frowned, as if in disbelief and dismay. He hummed and hawed as he jotted these findings into my medical dossier: he seemed in his own little world. Just as he was finishing his entry, his nurse poked her head into the office and announced, somewhat out of breath, “Excuse me, Dr. Nekkers, your 11 o’clock appointment is here and requires your immediate attention: blood pressure at rest is 220 over 115 and he has severe headaches” He was up and out the door before he could reply.

“Wow, that must be serious,” I thought, without really knowing what those numbers implied. Curious to find out something about myself, I leaned over his desk and read his last note in my chart:

History: 44-year-old male, senior manager, family history of heart disease and diabetes, here today for a routine check-up. Sedentary. Appears tired (?depressed). Complains of poor sleep and backaches.

No medications.

Physical exam: Obese male, mild sweating, poor dentition.

Rectal exam: haemorrhoids, no occult blood, prostate: normal, no nodules.

Assessment

Health risk level: High for diabetes and heart attack.

Health age: 61.8 years of age!

Plan: (tough case!)

- Health issue 1: Elevated blood pressure – learn to relax, control stress, reduce alcohol/coffee intake and start meds.
- Health issue 2: Excess weight (refractory), inactive. Low-fat diet.
- Health issue 3: Cholesterol imbalances: start med.